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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

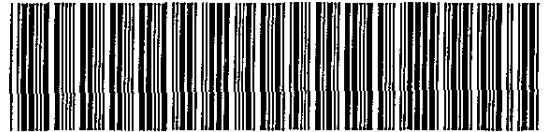
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
03 JUL 21 AM 10:25

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TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. 6327
Tallahassee, FL 32314

Subject: Cherri Drazkowski, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

() \$35.00 () \$ 43.75 () \$70.00 (X) \$78.75

From:

Ms. Cherri Drazkowski

Name

12092 SW 15th Street

Address

Pembroke Pines, FL 33025

City, State & Zip

(954) 441-9018

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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TALLAHASSEE, FLORIDA
03 JUL 21 AM 10:25

The undersigned incorporator (s) , for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I NAME

The Name of the corporation shall be:

Cherri Drazkowski, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12092 SW 15th Street
Pembroke Pines, FL 33025

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares of common

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ms. Cherri Drazkowski
12092 SW 15th Street
Pembroke Pines, FL 33025

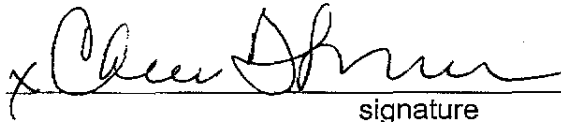
ARTICLE V INCORPORATOR (S)

The name (s) and street address (es) of the incorporator (s) to these Articles of Incorporation is (are) :

Ms. Cherri Drazkowski
12092 SW 15th Street
Pembroke Pines, FL 33025

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this

Fifteenth (15th) day of July, 2003.


signature

signature

signature

Article of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
03 JUL 21 AM 10:25

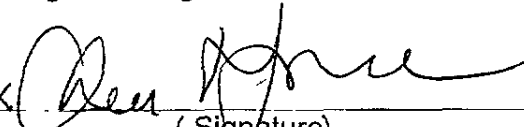
1. The name of the corporation is: Cherri Drazkowski, Inc.

2. The name and address of the registered agent and office is:
Ms. Cherri Drazkowski
(Name)

12092 SW 15th Street
(P.O. Box not acceptable)

Pembroke Pines, FL 33025
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

X 
(Signature)